MEDI-CAL

STANDARDS OF ASSISTANCE
2026 FEDERAL POVERTY LEVEL AMOUNTS
MONTHLY VALUES (FPL EFFECTIVE DATE*)

	Monthly FPL Values (Rounded to the next higher dollar)										
Family Size	***Maintenance Need***	***100%*** QMB	***108%*** Children Ages 6-19 ACA Expansion	***109%*** P/C Relative	***114%*** P/C Relatives enrolled in Medicare Part A/B	***120%*** SLMB	***128%*** Disabled New Adult Group	***133%*** Children Ages 1-6 ACA Expansion	***135%*** *QI-1*	***138%*** New Adult Group A&D FPL Pregnant	***142%*** Children Ages 1-6 ACA Expansion
1	600	1330	1437	1450	1517	1596	1703	1769	1796	1836	1889
2	750	1804	1949	1967	2057	2165	2310	2400	2436	2490	2562
2 Adults	934	1804	1949	1967	2057	2165	2310	2400	2436	2490	2562
3	934	2277	2460	2482	2596	2733	2915	3029	3074	3143	3234
4	1,100	2750	2970	2998	3135	3300	3520	3658	3713	3795	3905
5	1,259	3224	3482	3515	3676	3869	4127	4288	4353	4450	4579
6	1,417	3697	3993	4030	4215	4437	4733	4918	4991	5102	5250
7	1,550	4170	4504	4546	4754	5004	5338	5547	5630	5755	5922
8	1,692	4644	5016	5062	5295	5573	5945	6177	6270	6409	6595
9	1,825	5117	5527	5578	5834	6141	6550	6806	6908	7062	7267
10	1,959	5590	6038	6094	6373	6708	7156	7435	7547	7715	7938
11	1,973	6064	6550	6610	6913	7277	7762	8066	8187	8369	8611
12	1,987	6537	7060	7126	7453	7845	8368	8695	8825	9022	9283
Each Add'l	***14***	474	512	517	541	569	607	631	640	655	674

	Monthly FPL Values (Rounded to the next higher dollar)											
Family Size	***150%***	***160%*** OTLICP	***185%*** TMC (Pre-ACA)	***200%*** Qualified WD Individual RMA	***202%*** Post-ACA TMC	***208%*** ACA Infants Ages 0-1	***213%*** Pregnant & Infants up to Age 1	***250%*** 250% WDP, CSR	***266%*** OTLICP w/0.00 Premium	***322%*** MCAP & CCHIP	***350%***	***400%*** APTC
1	1995	2128	2461	2660	2687	2767	2833	3325	3538	4283	4655	5320
2	2706	2887	3338	3608	3645	3753	3843	4510	4799	5809	6314	7216
2 Adults	2706	2887	3338	3608	3645	3753	3843	4510	4799	5809	6314	7216
3	3416	3644	4213	4554	4600	4737	4851	5693	6057	7332	7970	9108
4	4125	4400	5088	5500	5555	5720	5858	6875	7315	8855	9625	11000
5	4836	5159	5965	6448	6513	6706	6868	8060	8576	10382	11284	12896
6	5546	5916	6840	7394	7468	7690	7875	9243	9835	11905	12940	14788
7	6255	6672	7715	8340	8424	8674	8883	10425	11093	13428	14595	16680
8	6966	7431	8592	9288	9381	9660	9892	11610	12354	14954	16254	18576
9	7676	8188	9467	10234	10337	10644	10900	12793	13612	16477	17910	20468
10	8385	8944	10342	11180	11292	11628	11907	13975	14870	18000	19565	22360
11	9096	9703	11219	12128	12250	12614	12917	15160	16131	19527	21224	24256
12	9806	10460	12094	13074	13205	13597	13924	16343	17389	21050	22880	26148
Each Add'l	711	759	877	948	958	986	1010	1185	1261	1527	1659	1896

***FPL Effective Date**	
MAGI Eligible	1/1/2026
MSP Property Limits	1/1/2026
MSP without RSDI	1/1/2026
MSP with RSDI	3/1/2026
Non-MAGI (Example: A&D FPL)	4/1/2026

MEDI-CAL

STANDARDS OF ASSISTANCE
2026 FEDERAL POVERTY LEVEL AMOUNTS
ANNUAL VALUES

	Annual FPL Values (Rounded to the next higher dollar)										
Family Size	***100%***	***108%***	***109%***	***114%***	***120%***	***128%***	***133%***	***135%***	***138%***	***142%***	***150%***
1	15960	17237	17397	18195	19152	20429	21227	21546	22025	22664	23940
2	21640	23372	23588	24670	25968	27700	28782	29214	29864	30729	32460
2 Adults	21640	23372	23588	24670	25968	27700	28782	29214	29864	30729	32460
3	27320	29506	29779	31145	32784	34970	36336	36882	37702	38795	40980
4	33000	35640	35970	37620	39600	42240	43890	44550	45540	46860	49500
5	38680	41775	42162	44096	46416	49511	51445	52218	53379	54926	58020
6	44360	47909	48353	50571	53232	56781	58999	59886	61217	62992	66540
7	50040	54044	54544	57046	60048	64052	66554	67554	69056	71057	75060
8	55720	60178	60735	63521	66864	71322	74108	75222	76894	79123	83580
9	61400	66312	66926	69996	73680	78592	81662	82890	84732	87188	92100
10	67080	72447	73118	76472	80496	85863	89217	90558	92571	95254	100620
11	72760	78581	79309	82947	87312	93133	96771	98226	100409	103320	109140
12	78440	84716	85500	89422	94128	100404	104326	105894	108248	111385	117660
Each Add'l	5680	6135	6192	6476	6816	7271	7555	7668	7839	8066	8520

	Annual FPL Values (Rounded up to next higher dollar)										
Family Size	***160%***	***185%***	***200%***	***202%***	***208%***	***213%***	***250%***	***266%***	***322%***	***350%***	***400%***
1	25536	29526	31920	32240	33197	33995	39900	42454	51392	55860	63840
2	34624	40034	43280	43713	45012	46094	54100	57563	69681	75740	86560
2 Adults	34624	40034	43280	43713	45012	46094	54100	57563	69681	75740	86560
3	43712	50542	54640	55187	56826	58192	68300	72672	87971	95620	109280
4	52800	61050	66000	66660	68640	70290	82500	87780	106260	115500	132000
5	61888	71558	77360	78134	80455	82389	96700	102889	124550	135380	154720
6	70976	82066	88720	89608	92269	94487	110900	117998	142840	155260	177440
7	80064	92574	100080	101081	104084	106586	125100	133107	161129	175140	200160
8	89152	103082	111440	112555	115898	118684	139300	148216	179419	195020	222880
9	98240	113590	122800	124028	127712	130782	153500	163324	197708	214900	245600
10	107328	124098	134160	135502	139527	142881	167700	178433	215998	234780	268320
11	116416	134606	145520	146976	151341	154979	181900	193542	234288	254660	291040
12	125504	145114	156880	158449	163156	167078	196100	208651	252577	274540	313760
Each Add'l	9088	10508	11360	11474	11815	12099	14200	15109	18290	19880	22720

FPL PROGRAM DESCRIPTIONS

100% FPL	= Qualified Medicare Beneficiary (QMB) Program
108% FPL	= ACA Title XXI CHIP Expansion Children Ages 6-19
109% FPL	= ACA Parents and Caretaker Relatives
114% FPL	= ACA Parents and Caretaker Relatives Not Eligible for the ACA New Adult Group due to non-Financial Eligibility Criteria such as 65 years of age or older or Enrollment in Medicare Parts A or B (109% FPL, Plus 5% MAGI Disregard)
120% FPL	= < Specified Low-Income Medicare Beneficiaries (SLMB)
128% FPL	= Disabled Individuals in New Adult Group
133% FPL	= ACA Children and Title XXI Expansion Children Ages 6-19
135% FPL	= < Qualified Individual 1 Program (QI-1)
138% FPL	= ACA New Adults Ages 19-64; and = FPL Program for Aged & Disabled
142% FPL	= ACA and Title XXI Expansion Children Ages 1-6
160% FPL	= ACA Optional Targeted Low-Income Children (OTLIC) Program starting point for premiums
185% FPL	= Transitional Medi-Cal (TMC) (Pre-ACA)
200% FPL	= Qualified Working Disabled Individuals = Refugee Medical Assistance (RMA)
202% FPL	= Transitional Medi-Cal (TMC) (Post ACA) *(ACWDL will be released when implemented)
208% FPL	= ACA and Title XXI Expansion Infants Ages 0-1
213% FPL	= Full-Scope Coverage for ACA Pregnant Persons
Above 213% to 322% FPL	= Medi-Cal Access Program (MCAP) = Medi-Cal Access Infant Program (MCAIP)
250% FPL	= Working Disabled Program
266% FPL	= ACA OTLIC
Above 266% to 322% FPL	= County Children's Health Initiative Program (C-CHIP)
400+% FPL	= Unsubsidized Coverage
$35.00	= Maintenance Need for Resident in LTC Facility

Notes: "=" means: eligible if budget unit income is equal to or less than income limit

"<" means: eligible if budget unit income is less than income limit

">" means: eligible if budget unit income is greater than income limit

- MSP includes Qualified Medicare Beneficiary (QMB), Specified Low-Income Beneficiary (SLMB) and Qualified Individual (QI-1) Programs.
- For applicants and recipients of the Medicare Savings Programs (MSPs) not receiving RSDI Title II Income, the FPL figures are effective January 1, 2026.
- For applicants and recipients of MSPs receiving RSDI Title II income, the new FPL figures are effective March 1, 2026.

Long Term Care	
LTC Maintenance Need (eff. 1/85)	$35
Home Upkeep (living alone)	$209
Home Upkeep (other situations	$138

Spousal Impoverishment	
Spousal Income Allocation (also referred to as the Minimum Monthly Maintenance Needs Allowance (MMMNA)) (eff. 1/1/2026)	$4,067*
*Pursuant to Section 50603(f), a higher monthly spousal income allocation amount may be used in place of the calculated maximum based on the MMMNA if ordered by the court or through fair hearing.	
Community Spousal Resource Allowance (CSRA) (eff. 1/1/2026 – does not apply when the initial month of eligibility 1/1/2024 through 12/31/2025*)	$162,660
Dependent Relative with Community Spouse (also referred to as the Family Members Base Allocation (FMBA)) (eff. 7/1/2026-6/30/2027)	$2,705

Average Private Pay Rate (APPR) for Nursing Facility Services (NFS)

(Use this rate when calculating a period of ineligibility (POI) for NFS when an institutionalized individual makes a disqualifying transfer of nonexempt property for less than fair market value (FMV)).

Note: Do not update existing POIs for NFS on an annual basis.

2026 Transfers	$14,440
2025 Transfers	$13,656
2024 Transfers	$12,608
2023 Transfers	$11,576
2022 Transfers	$10,933
2021 Transfers	$10,298
2020 Transfers	$10,298
2019 Transfers	$9,337
2018 Transfers	$8,841
2017 Transfers	$8,515
2016 Transfers	$8,189
2015 Transfers	$8,092
2014 Transfers	$7,628
2013 Transfers	$7,549

Federal Benefit Rate (FBR) (eff. 1/2027)

Note: This is used to determine the Parental Allocation.

Aged, Blind, Disabled	FBR
Individual	$1,029/month
Couple	$1,544/month

Medicare Premiums & Deductibles (2026)	
Part A Premium	$565
Part A Deductible	$1,736**
Part B Premium	$202.90***
Part B Premium B-ID	$121.60*
Part B Deductible	$283

*The premium is equal to 15 percent of the monthly actuarial rate for enrollees aged 65 and over for that succeeding calendar year.

**The 2026 Part A deductible is $1,736 for the first 60 days of inpatient care. Days 61-90 are $434/day. For days 91-150, the deductible will be $868/day. If in LTC, the deductible is $217/day for days 21-100. There is no deductible for days 1-20 of residency.

***The Social Security Administration (SSA) has advised DHCS that there is **2.8 percent** cost of living adjustment (COLA) for Social Security benefits in 2026. Because of this COLA, some Medicare beneficiaries, who were "held harmless" against Medicare Part B premium increases in prior years will see an increase in their 2026 monthly Medicare Part B premium. The Medicare premium increase will be based on the amount of the individual's COLA increase.

Income Multipliers	
Weekly	4.33
Bi-Weekly	2.167
Monthly	1
Bi-Monthly	2

Substantially Gainful Activity (SGA) (eff. 1/2027)	
Blind	$2,950/month
Disabled	$1,770/month

Non-MAGI Medi-Cal Property Limit

*Effective 1/1/2024 through 12/31/2025, the asset limits were eliminated for all Non-MAGI programs, with exception of the Pickle, DAC and DW programs. Effective 1/1/2027, the Pickle, DAC and DW programs will have the asset limit test applied as part of the eligibility determination.

Family Size	Property Limit (eff. 7/2022-12/2023 and 1/2026)	MSP Property Limit (eff. 1/2026)
1	$130,000	QMB/SLMB/QI-1
2	$195,000	
3	$260,000	$130,000 Individual
4	$325,000	
5	$390,000	$195,000 Couple
6	$455,000	
7	$520,000	
8	$585,000	
9	$650,000	
10	$715,000	

Pickle Resource Limits (eff. 1/2027) *Effective 1/1/2024 through 12/31/2026, the asset limits for Pickle, DAC, and DW programs are eliminated.	
1 Person	$130,000
2 Persons	$195,000
Ea. Add'l Person	$65,000

Value of the 1/3 Reduction (VTR) (eff. 1/2026 – not rebuttable)	
Individual	$331.33
Couple	$497.00

Presumed Maximum Value (PMV) (eff. 1/2026 – rebuttable)	
Individual	$351.33
Couple	$517.00

QMB Standards (eff. 1/2027)	
SSI Standard Allocation - The SSI standard and parent allocation amounts are based on the federal benefit rate (FBR), which is based on the annual Cost of Living Adjustment (COLA). The Social Security COLA is **3.6%** for 2027; the standard allocation amount is $516, which is calculated by subtracting the FBR for an eligible individual from the FBR for an eligible couple. The allocation for ineligible children is deducted for each ineligible child who lives in the household (excluding any child who receives public assistance). **Note:** The unrounded amounts for 2027 equal the unrounded amounts for 2026 increased by 3.6%.	$516
Property Limits (eff. 1/2026)	
Individual	$130,000
Couple	$195,000
Parental Allocation	
One ineligible parent lives with child	$1,029
Both ineligible parents live with child	$1,544

Income In-Kind

Note: Effective 9/30/2024, food was eliminated from the definition of In-Kind Support and Maintenance (ISM) for the Supplemental Security Income (SSI) Program. To remain no more restrictive than the SSI program, In-Kind amounts for food was eliminated from Non-MAGI Medi-Cal programs.

Family Size (# in MFBU)	Housing	Utilities
1	$153	$33
2	$206	$38
3	$225	$40
4 or more	$236	$41

Tuberculosis (TB) Individual Limits

TB Income Standard is calculated using the SSI break-even point computation:
Current year FBR x 2 + $85 = TB Income Standard for an Individual
*Effective 2026 | **Effective 1/1/2024 through 12/31/2025, the asset limits were eliminated for all Non-MAGI programs.

Income Standard	$2,073*
Resource Limit = Individual	$130,000 (eff. 1/2026)**

Note: If the applicant is married and living with a spouse, use only the applicant's income received in his/her name. If the applicant is married, when determining property, use only the applicant's separate property and one-half of the community property. When determining a child's eligibility, and there are two parents present, allow the parents a property limit of $195,000. When there is only one parent, use the individual resource limit of $130,000.

Year	TB Income Standard	SSI Standard Allocation	FBR
2022	Individual: $1,767	$420	Individual: $841 Couple: $1,261
2023	Individual: $1,913	$457	Individual: $914 Couple: $1,371
2024	Individual: $1,971	$472	Individual: $943 Couple: $1,415
2025	Individual: $2,019	$483	Individual: $967 Couple: $1,450

Student Earned Income Exclusion (SEIE) (eff. 1/2027)

Note: To be eligible for the student earned income deduction, the student must under the age of 22 (including those who meet the SSI program's definition of a child), regularly attending school as defined by SSA, and be in the Medi-Cal Family Budget Unit (MFBU) of an individual who is aged, blind, or disabled.

Monthly Exclusion $2,500
Annual Maximum $10,080

The monthly and annual student earned income deduction limits shall be in accordance with the table below:

Year	Monthly Exclusion	Maximum Exclusion for Calendar Year
2026	$2,410	$9,730
2025	$2,350	$9,460
2024	$2,290	$9,230
2023	$2,220	$8,950
2022	$2,040	$8,230
2021	$1,930	$7,770
2020	$1,900	$7,670
2019	$1,870	$7,550
2018	$1,820	$7,350
2017	$1,790	$7,200
2016	$1,780	$7,180
2015	$1,780	$7,180
2014	$1,750	$7,060
2013	$1,730	$6,960
2012	$1,700	$6,840
2011	$1,640	$6,600
2010	$1,640	$6,600
2009	$1,640	$6,600
2008	$1,550	$6,240
2007	$1,510	$6,100
2006	$1,460	$5,910
2005	$1,410	$5,670
2004	$1,370	$5,520
2003	$1,340	$5,410
2002	$1,320	$5,340
2001	$1,290	$5,200
2000 and earlier	$400	$1,620

SSI/SSP Payment Standards Effective 1/1/2026

INDIVIDUAL

	Independent Living Arrangement	Reduced Needs	Non-Medical Out-of-Home Care (NMOHC)	
AGED or DISABLED	**Residing in Own Household**	**Household of Another with In-Kind Room & Board**	**Household of Relative with In-Kind Room & Board**	**Licensed Facility or Household of Relative Without In-Kind Room & Board**
SSI	$994.00	$662.67	$662.67	$994.00
SSP	$239.94	$245.20	$624.40	$632.07
Total	**$1,233.94**	**$907.87**	**$1,287.07**	**$1,626.07**

	Independent Living Arrangement	Reduced Needs	Non-Medical Out-of-Home Care (NMOHC)	
AGED or DISABLED without cooking facilities (RMA)[1]	**Residing in Own Household**	**Household of Another with In-Kind Room & Board**	**Household of Relative with In-Kind Room & Board**	**Licensed Facility or Household of Relative Without In-Kind Room & Board**
SSI	$994.00	N/A	N/A	N/A
SSP	$368.81	N/A	N/A	N/A
Total	**$1,362.81**	**N/A**	**N/A**	**N/A**

	Independent Living Arrangement	Reduced Needs	Non-Medical Out-of-Home Care (NMOHC)	
BLIND	**Residing in Own Household**	**Household of Relative with In-Kind Room & Board**	**Household of Relative with In-Kind Room & Board**	**Licensed Facility or Household of Relative Without In-kind Room & Board**
SSI	$994.00	$662.67	$662.67	$994.00
SSP	$324.32	$329.58	$624.40	$632.07
Total	**$1,318.32**	**$992.25**	**$1,287.07**	**$1,626.07**

	Independent Living Arrangement	Reduced Needs	Non-Medical Out-of-Home-Care (NMOHC)	
DISABLED MINOR	**Residing in Own Household**	**Household of Another with In-Kind Room & Board**	**Household of Relative with In-Kind Room & Board**	**Licensed Facility or Household of Relative Without In-Kind Room & Board**
SSI	$994.00	$662.67	$662.67	$994.00
SSP	$97.27	$102.53	$624.40	$632.07
Total	**$1,091.27**	**$765.20**	**$1,287.07**	**$1,626.07**

COUPLE

	Independent Living Arrangement	Reduced Needs	Non-Medical Out-of-Home-Care (NMOHC)	
AGED or DISABLED (Per Couple)	**Residing in Own Household**	**Household of Another with In-Kind Room & Board**	**Household of Relative with In-Kind Room & Board**	**Licensed Facility or Household of Relative Without In-Kind Room & Board**
SSI	$1,491.00	$994.00	$994.00	$1,491.00
SSP	$607.83	$615.70	$1,604.20	$1,761.14
Total	**$2,098.83**	**$1,609.70**	**$2,598.20**	**$3,252.14**

	Independent Living Arrangement	Reduced Needs	Non-Medical Out-of-Home Care (NMOHC)	
AGED or DISABLED without Cooking Facilities (RMA)[1]	**Residing in Own Household**	**Household of Another with In-Kind Room & Board**	**Household of Relative with In-Kind Room & Board**	**Licensed Facility or Household of Relative Without In-Kind Room & Board**
SSI	$1,491.00	N/A	N/A	N/A
SSP	$865.57	N/A	N/A	N/A
Total	**$2,356.57**	**N/A**	**N/A**	**N/A**

	Independent Living Arrangement	Reduced Needs	Non-Medical Out-of-Home Care (NMOHC)	
BLIND (Per Couple)	**Residing in Own Household**	**Household of Another with In-Kind Room & Board**	**Household of Relative with In-Kind Room & Board**	**Licensed Facility or Household of Relative Without In-Kind Room & Board**
SSI	$1,491.00	$994.00	$994.00	$1,491.00
SSP	$833.35	$755.31	$1,604.20	$1,761.14
Total	**$2,324.35**	**$1,749.31**	**$2,598.20**	**$3,252.14**

BLIND/AGED or DISABLED (Per Couple)	**Residing in Own Household**	**Household of Another with In-Kind Room & Board**	**Household of Relative with In-Kind Room & Board**	**Licensed Facility or Household of Relative Without In-Kind Room & Board**
SSI	$1,491.00	$994.00	$994.00	$1,491.00
SSP	$747.44	$755.31	$1,604.20	$1,761.14
Total	**$2,238.44**	**$1,749.31**	**$2,598.20**	**$3,252.14**

NON-MEDICAL OUT-OF-HOME CARE COSTS

Room and Board	Care and Supervision	Personal and Incidental Needs	Title XIX Medical Facility
$706.07	**Minimum** $596.00	**Minimum** $182.00	**Individual** $62.00
N/A	**Maximum** $738.00	**Maximum** $324.00	**Couple** $124.00

[1] Restaurant Meals Allowance (RMA) – RMA amounts are included in the total

Note: Independent living arrangement for a disabled minor means living in the home of his/her parents. Household of another is used if both the disabled minor and his/her parents live in the household of someone else (e.g., grandparents), etc.

2025 SSI Pickle Multipliers (ACWDL 25-29)

Date of Last SSI	Cost of Living Amount	Multiplier	Date of Last SSI	Cost of Living Amount	Multiplier
April 1977–June 1977	1.059	0.8189	Jan. 2002–Dec. 2002	1.014	0.4516
July 1977–June 1978	1.065	0.8082	Jan. 2003–Dec. 2003	1.021	0.4440
July 1978–June 1979	1.099	0.7958	Jan. 2004–Dec. 2004	1.027	0.4323
July 1979–June 1980	1.143	0.7755	Jan. 2005–Dec. 2005	1.041	0.4170
July 1980–June 1981	1.112	0.7434	Jan. 2006–Dec. 2006	1.033	0.3931
July 1981–June 1982	1.074	0.7147	Jan. 2007–Dec. 2007	1.023	0.3730
July 1982–Dec. 1983	1.035	0.6936	Jan. 2008–Dec. 2008	1.058	0.3586
Jan. 1984–Dec. 1984	1.035	0.6829	Jan. 2009–Dec. 2009	1.000	0.3214
Jan. 1985–Dec. 1985	1.031	0.6718	Jan. 2010–Dec. 2010	1.000	0.3214
Jan. 1986–Dec. 1986	1.013	0.6616	Jan. 2011–Dec. 2011	1.036	0.3214
Jan. 1987–Dec. 1987	1.042	0.6572	Jan. 2012–Dec. 2012	1.017	0.2970
Jan. 1988–Dec. 1988	1.040	0.6428	Jan. 2013–Dec. 2013	1.015	0.2850
Jan. 1989–Dec. 1989	1.047	0.6285	Jan. 2014–Dec. 2014	1.017	0.2743
Jan. 1990–Dec. 1990	1.054	0.6111	Jan. 2015-Dec. 2015	1.000	0.2620
Jan. 1991–Dec. 1991	1.037	0.5901	Jan. 2016-Dec. 2016	1.003	0.2620
Jan. 1992–Dec. 1992	1.030	0.5749	Jan. 2017-Dec. 2017	1.020	0.2597
Jan. 1993–Dec. 1993	1.026	0.5621	Jan. 2018-Dec. 2018	1.028	0.2449
Jan. 1994–Dec. 1994	1.028	0.5508	Jan. 2019-Dec.2019	1.016	0.2238
Jan. 1995–Dec. 1995	1.026	0.5382	Jan. 2020-Dec. 2020	1.013	0.2114
Jan. 1996-Dec. 1996	1.029	0.5262	Jan. 2021-Dec. 2021	1.059	0.2011
Jan. 1997-Dec.1997	1.021	0.5124	Jan. 2022-Dec. 2022	1.087	0.1540
Jan. 1998–Dec. 1998	1.013	0.5022	Jan. 2023-Dec. 2023	1.032	0.0804
Jan. 1999–Dec. 1999	1.024	0.4957	Jan. 2024-Dec. 2024	1.025	0.0510
Jan. 2000–Dec. 2000	1.035	0.4836	Jan. 2025-Dec. 2025	1.028	0.0272
Jan. 2001–Dec. 2001	1.026	0.4655			

2025 Pickle Disregard Computation Chart

Effective January 1, 2026, use the enclosed chart (Enclosure 3) when computing a Title II disregard amount for Pickle eligibles and applicants. The COLA disregard relates to individuals who were terminated from SSI/SSP in December 2025, and thus, the chart is titled with the year 2025. The chart is titled with the year 2025 because the COLA disregard relates to individuals who were terminated from SSI/SSP in 2025.

Below is an example of how to determine the Pickle disregard for an applicant/Med-Cal beneficiary:

2026 gross Title II benefit amount:	$1,800.00
2025 disregard multiplier:	x 0.0272
Raw Disregard Amount:	$ 48.96
Disregard rounded down to the nearest whole dollar:	**$ 48.00**

2025 gross Title II benefit amount:	$1,800.00
Subtract disregard:	- $48.00
Total:	$1,752.00

Total countable Title II income: $1,752.00